

REMARKS

Claims 1-41 are pending. Reconsideration of the rejection is respectfully requested in view of the amendments and remarks.

Claims 1, 21, 36 and 40 are the independent claims.

Claims 8 and 12 have been rejected under 35 USC 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which application regards as the invention.

Claim 8 has been amended to claim “wherein the step of removing the patient identifying information from the patient data record comprises removing database elements that contain the patient identifying information.” In Claim 12, the word “in” has been amended to “from”. The amendments to Claims 8 and 12 are believed to cure the antecedent basis informalities cited in the rejection. Reconsideration of the rejection is respectfully requested.

Claims 1, 3-7, 9-11, 15-21, 23-27, 29-31 and 34-41 have been rejected under 35 USC 103(a) as being unpatentable over Kalies (US 2004/0143594), in view of Hagan (US 2001/0054155). The Examiner stated essentially that the combined teachings of Kalies and Hagan teach or suggest all the limitations of Claims 1, 3-7, 9-11, 15-21, 23-27, 29-31 and 34-41.

Claims 1 and 21 claim, *inter alia*, “removing the patient identifying information from the patient data record to generate a de-identified data record comprising unencrypted patient data in the patient data record which does not identify the patient; generating an encrypted ID for the patient, wherein the encrypted ID comprises an encrypted representation of one or more items of patient identifying information; and storing the encrypted ID with or in the de-identified data record.” Claim 36 claims, *inter alia*, “removing the individual identifying information from the data record to generate a de-identified data record comprising unencrypted data in the data record which does not identify the individual; generating an encrypted ID for the individual, wherein the encrypted ID comprises an encrypted representation of one or more items of individual identifying information; and storing the encrypted ID with or in the de-identified data record.” Claim 40 claims, *inter alia*, “a third data processing system comprising: a third repository that stores a master decryption key; and an encryption system that can use the master decryption key

to decrypt an encrypted ID of de-identified data records in the second repository to re-identify the individual."

Kalies teaches, at paragraph [0041], that data is de-identified at step s28 to protect patient privacy, formatted into a report at step s30, encrypted at step s32, then sent to user 60 at step s34... Kalies does not teach or suggest "generating an encrypted ID for the patient, wherein the encrypted ID comprises an encrypted representation of one or more items of patient identifying information; and storing the encrypted ID with or in the de-identified data record" as claimed in Claims 1 and 21, and essentially as claimed in Claim 36, nor "a third repository that stores a master decryption key; and an encryption system that can use the master decryption key to decrypt an encrypted ID of de-identified data records in the second repository to re-identify the individual" as claimed in Claim 40. Kalies teaches that the de-identify step removes patient identifying information prior to encryption. Kalies does not teach encryption of patient identifying information; Kalies does not teach or suggest all the limitations of Claims 1, 21, 36 and 40.

Hagan teaches that each user is assigned a unique Universal Anonymous Identifier (UAI) which is generated by a third party registration authority and provided to the Web site operator (see paragraph [0029]). Hagan does not teach or suggest "generating an encrypted ID for the patient, wherein the encrypted ID comprises an encrypted representation of one or more items of patient identifying information; and storing the encrypted ID with or in the de-identified data record" as claimed in Claims 1 and 21, and essentially as claimed in Claim 36, nor "a third repository that stores a master decryption key; and an encryption system that can use the master decryption key to decrypt an encrypted ID of de-identified data records in the second repository to re-identify the individual" as claimed in Claim 40. Hagan is clear that the UAI is "non-identifying" (see paragraph [0067]); the user assigned such a UAI remains "anonymous." The interpretation of the UAI as being "an encrypted ID for the patient" is counter to not only usage described by Hagan but more fundamentally, the plain meaning of the acronym "UAI" - Universal *Anonymous* Identifier (emphasis added). Indeed the UAI is simply a tool that may be used to access data and does not in any sense operate to identify the user on its own - it is "anonymous." Therefore, Hagan fails to cure the deficiencies of Kalies.

The combined teachings of Kalies and Hagan teach a method for removing patient identifying information and providing access to said de-identified information via a Universal

Anonymous Identifier (UAI), which is itself, non-identifying. The combined teachings of Kalies and Hagan fail to teach or suggest all the limitations of Claims 1, 21, 36 and 40.

Claims 2 and 22 have been rejected under 35 USC 103(a) as being unpatentable over Kalies, in view of Hagan and further inv view of Nagel (USPN 7,181,017). The Examiner stated essentially that the combined teachings of Kalies, Hagan and Nagel teach or suggest all the limitations of Claims 2 and 22.

Claims 2 and 22 depend from Claims 1 and 21, respectively. The dependent claims are believed to be allowable for at least the reasons given for the independent claims.

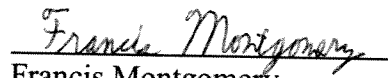
Claims 12-14 and 32-33 have been rejected under 35 USC 103(a) as being unpatentable over Kalies, in view of Hagan and further inv view of Jordan (USPN 6,823,203). The Examiner stated essentially that the combined teachings of Kalies, Hagan and Nagel teach or suggest all the limitations of Claims 12-14 and 32-33.

Claims 12-14 and 32-33 depend from Claims 1 and 21, respectively. The dependent claims are believed to be allowable for at least the reasons given for the independent claims.

For the forgoing reasons, the application, including Claims 1-41 is believed to be in condition for allowance. Early and favorable reconsideration of the case is respectfully requested.

Respectfully Submitted,

Date: January 10, 2008


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